Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

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Account Name : SUPERBIZ.COM, INC.

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Email Address:

FLORIDA LIMITED LIABILITY CO. **GB INSURANCE LLC**

Certificate of Status	0
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ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I NAME

The name of the Limited Liability Company is:

GB INSURANCE LLC

ARTICLE II ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

8209 SW 82ND COURT

MIAMI, FLORIDA 33143

ARTICLE III PURPOSE

The purpose for which this Limited Liability Company is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV REGISTERED AGENT

The name and the Florida street address of the registered agent are:

GISELE BRAITHWAITE

8209 SW 82ND COURT

MIAMI, FLORIDA 33143

SECRETARY STALL AHASSES

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

GISELE BRAITHWAIT / Registered Agent's signature

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ARTICLE V

The name and address of each person authorized to manage and control the Limited Liability Company:

AUTHORIZED MEMBER GISELE BRAITHWAITE 8209 SW 82ND COURT MIAMI, FLORIDA 33143

X GISELE BRANTHWAITE / Authorized Representative's signature

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)